	PATEN	ORE)				Docker						
Effective October 1, 2003										0/8	10	,068	<u> </u>
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	.EN □.	YTITY	0		ER THAN L ENTITY
T	OTAL CLAIM	1S 38						RATE		FEE	٦	RATE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	EE	385.0	0 0	BASIC FE	E 770.0
TOTAL CHARGEABLE CLAIMS			38 n	38 minus 20=		. 18		XS 9=	_		O	X\$18=	324
INDEPENDENT CLAIMS			4	<i>டி</i> minus 3 =		•		X43=		-		You	
Мι	JLTIPLE DEP	ENDENT CLAIM	PRESENT	RESENT							- OF	`	86
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=	4		OF	+290=	
								TOTAL	- <u>L</u>		OF	R TOTAL	1,180
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALI	L E	NTITY	OR		R THAN ENTITY
VT A		CLAIMS REMAINING AFTER		HIGHE NUMB PREVIO	ST ER	PRESENT EXTRA		RATE	•	ADDI- TIONAL]	RATE	ADDI- TIONA
AMENDMENT A	·Total	AMENDMENT	Minus	PAID F	OR				+	FEE	-	 	FEE
AEN	Independent	•	Minus	**		=	-	X\$ 9=	\bot		OR	X\$18=	ļ
Ā	FIRST PRES	ENTATION OF M	ION OF MULTIPLE DEPENDENT		CLAIM		Ļ	X43=	\perp		OR	X86=	
1,13,20,31								+145=			OR	+290=	
1 7 1 - 1 - 1							AI	TOTAL			OR	TOTAL ADDIT. FEE	
_	- ·	(Column 1)		(Colum		(Column 3)	_						
5 1		REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		= .		X43= ·	T	•	OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT C	LAIM	· 🔲	H		╁	·	1 1		
								+145= TOTAL	Ļ		OR	+290=	
								DIT. FEE			OR .	TOTAL ADDIT. FEE	<u> </u>
Т	<u> </u>	(Column 1) CLAIMS		(Column		(Column 3)			_			·	
		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
	otal	•	Minus	**		=	5	(\$ 9=	Ť		OR	X\$18=	1 66
	ndependent		Minus	***		=	\vdash	<43=					
<u> </u> F	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							170-		\dashv	OR	X86=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
- II t	* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL DDIT. FEE	
Th	e *Highest Num	ber Previously Paid	For (Total or	Independent)	is the !	nighest number fo	ound i	n the app	ropr	iate box	in colu	mn 1.	·